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SERIAL NUMBER 10/761,450	FILING OR 371(c) DATE 01/20/2004 RULE	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. PMT-0104
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/440,748 01/17/2003

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **

** 04/23/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MN	3	31	3
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

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TITLE

MRI-compatible surgical instruments

FILING FEE RECEIVED 484	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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